

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State

Received and Filed

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Fee receipt: \$138.00

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Certificate of Authority

RCA

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a limited liability company.
2. The name of the entity is: SHAZ KY1 VENTURES LLC
3. The name of the entity to be used in Kentucky is (if applicable):
4. It is an entity organized and existing under the laws of the state of New Jersey.
5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

**Principal Office**

11 Michalik Dr  
Sayerville, NJ 08872

**Registered Agent Name/Address**

Thomas P Jones  
Woodstone Reality  
1942 Campus Place  
Louisville, KY 40299

**Members/Managers**

Member	Shivir Cherukuri	11 Michalik dr, Sayerville, nj 08872
Manager	Thomas P Jones	Woodstone Reality, 1142 campus place, Louisville, KY 40299

6. Shivir Cherukuri, Representative Shaz Ventures Inc, on 10/28/2023
7. I, Thomas P Jones, consent to serve as the registered agent on behalf of the this entity on 10/28/2023